

## Seminose Nation of Oksahoma

## TRIBAL ENROLLMENT OFFICE

P.O. Box 1498 Phone (405) 257-7244 WEWOKA, OKLAHOMA 74884-1498

## RELINQUISHMENT OF MINOR CHILD'S MEMBERSHIP IN THE SEMINOLE NATION

I,, state that I am the	parent having legal custody of,
a minor child whose birth date is, and	d whose social security number is,
or that I am the legal guardian of the child shown b	by the attached certified copy of a court order. I do hereby
relinquish the above named child's membership in the	he Seminole Nation of Oklahoma, conditioned on the child's
acceptance for enrollment in the	Tribe, I understand that the relinquishment will
be effective on the date of the enrollment in the other	er tribe, and that the Seminole Nation will remove the child's
name from the membership rolls of the Seminole N	Nation when notified of the child's acceptance in the other
tribe.	
I am making this relinquishment voluntarily and und	lerstand that this relinquishment terminates all of the child's
rights as a member of the Seminole Nation. I	understand that when this relinquishment of the child's
membership becomes final, it will be an absolute an	nd irrevocable relinquishment, and that the child will not be
able to reapply for membership with the Seminole Na	ation of Oklahoma.
Signature:	Date:
Subscribed and sworn to before me this day	of, 20
	Notary Public
	My Commission Expires:
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FOR ENROLLMENT OFFICE USE ONLY:	
Date Relinquishment Received:	
Received By (Initials):	